

## General Assembly

Raised Bill No. 5647

February Session, 2002

LCO No. 2051

Referred to Committee on Insurance and Real Estate

Introduced by: (INS)

## AN ACT CONCERNING NOTICE OF MEDICAL MALPRACTICE INSURANCE FILINGS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- Section 1. Section 38a-676 of the general statutes, as amended by section 14 of public act 01-174, is repealed and the following is substituted in lieu thereof (*Effective October 1, 2002*):
  - (a) (1) With respect to rates pertaining to commercial risk insurance, and subject to the provisions of subsection (b) of this section with respect to workers' compensation and employers' liability insurance, on or before the effective date [thereof, every] of such insurance, each admitted insurer shall submit to the Insurance Commissioner for the commissioner's information, except as to inland marine risks which by general custom of the business are not written according to manual rates or rating plans, [every] each manual of classifications, rules and rates, and every minimum, class rate, rating plan, rating schedule and rating system and any modification of the foregoing which it uses. Such submission by a licensed rating organization of which an insurer is a member or subscriber shall be sufficient compliance with this section for any insurer maintaining membership or subscribership in

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such organization, to the extent that the insurer uses the manuals, minimums, class rates, rating plans, rating schedules, rating systems, policy or bond forms of such organization. The information shall be open to public inspection after its submission.

- (2) With respect to any filing described in subsection (a) of this section for medical malpractice insurance, if a person requests, in writing, that the commissioner send the person written notice of any medical malpractice insurance filing, the commissioner shall provide notice each time such filing is made. A person may (A) inspect and copy such filings at the person's expense, (B) submit written comments to the commissioner on such filing not later than thirty calendar days after the date the commissioner sends the notice of filing, and the commissioner shall consider such comments before making a decision to approve such filing, and (C) request a hearing on the commissioner's decision in accordance with section 38a-19.
- (b) Each filing as described in subsection (a) of this section for workers' compensation or employers' liability insurance shall be on file with the Insurance Commissioner for a waiting period of thirty days before it becomes effective, which period may be extended by the commissioner for an additional period not to exceed thirty days if the commissioner gives written notice within such waiting period to the insurer or rating organization which made the filing that the commissioner needs such additional time for the consideration of such filing. Upon written application by such insurer or rating organization, the commissioner may authorize a filing which the commissioner has reviewed to become effective before the expiration of the waiting period or any extension thereof. A filing shall be deemed to meet the requirements of sections 38a-663 to 38a-696, inclusive, as amended, unless disapproved by the commissioner within the waiting period or any extension thereof. If, within the waiting period or any extension thereof, the commissioner finds that a filing does not meet the requirements of said sections, the commissioner shall send to the insurer or rating organization which made such filing written notice of

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disapproval of such filing, specifying therein in what respects the commissioner finds such filing fails to meet the requirements of said sections and stating that such filing shall not become effective. Such finding of the commissioner shall be subject to review as provided in section 38a-19.

(c) The form of any insurance policy or contract the rates for which are subject to the provisions of sections 38a-663 to 38a-696, inclusive, <u>as amended</u>, other than fidelity, surety or guaranty bonds, and the form of any endorsement modifying such insurance policy or contract, shall be filed with the Insurance Commissioner prior to its issuance. The commissioner shall adopt regulations, in accordance with the provisions of chapter 54, establishing a procedure for review of such policy or contract. If at any time the commissioner finds that any such policy, contract or endorsement is not in accordance with such provisions or any other provision of law, the commissioner shall issue an order disapproval the issuance of such form and stating the reasons for disapproval. The provisions of section 38a-19 shall apply to any such order issued by the commissioner.

This act shall take effect as follows:	
Section 1	October 1, 2002

## Statement of Purpose:

To require the Insurance Commissioner to provide notice of medical malpractice rate filings and to require the commissioner to consider comments received concerning the filings.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

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